

North Dakota Office of State Tax Commissioner
As Contractor for Three Affiliated Tribes Tax Commissioner
Three Affiliated Tribes Motor Vehicle Fuel Tax Report

Tax Type 61
Form S01

61



Report for Month _____, 20____

Check if Amended Report ☐

Business Name (as it appears on your license)	FEIN	Suffix
Address	License #	
City, Town or Post Office, State, and Zip Code	Telephone #	

This report is due on or before the 25th of the month
Mail to: Office of State Tax Commissioner
600 E. Boulevard Ave., Dept. 127
Bismarck ND 58505-0599

Check box to cancel license ☐

Attach license. Cancellation date _____

Column A	Column B	Column C	Column D	Column E	Column F
Gasoline Pro. 065	Gasohol E-85 Pro. 124, 079	Unblended Ethanol Pro. 241	Unblended Methanol Pro. 243	Blending Components Pro. 122	Column Totals
~~Do not make an entry in a shaded area~~					
1. Inventory forward = last month's line 13 entries.					1. W
2. Gal. mfg., purchased, imported = Schs. 1+2+3.					2. X
3. Product transfers (+ or -) within tax type 61.					3.
4. Not used for tribal report.					4. D
5. Not used for tribal report.					5. F
6. Gal. taxable at \$.23 per gal. = Schs. 5A+5Q.					6.
7. Gal. from \$.23 per gal. tax-pd inven. = Sch. 10G.					7. H
8. Net gal. taxable at \$.23 per gal. = lines 6-7.					8. Q
9. Net gal. gasohol taxable at \$.23 per gal. = lines 6-7.					9. A
10. Gal. non-taxable = Schs. 6+7.					10. N
11. Gal. tax-exempt = Schs. 8+10.					11. L
12. Book inventory = lines 1+2+3-6-10-11.					12.
13. Ending physical inventory.					13. Y
14. Gains (or losses): lines 13-12.					14. B
15. Tax due at \$.23 per gal. = \$.23 x line 8.					15. C
16. Tax due at \$.23 per gal. on gasohol = \$.23 x line 9.					16. R
17. Tax subject to allowance = lines 15+16.					17.
18. Collection allowance = .02 x line 17.					18. I
19. Total tax due = lines 17-18.	For lines 1 through 16, enter the total of Columns A through E in Column F				19.
20. Penalty = .05 x line 19 (min. \$5.00).					20. T
21. Interest = .01 per month x line 19.	For lines 17 through 23, use Column F only				21. U
22. Insp. Fees = total of Col. F (lines 8+9+11) x .00025.					22. 6
23. Total due = lines 19+20+21+22.					23.

I declare under the penalties of North Dakota Century Code § 12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return.

Signature of Taxpayer

Title

Date

Signature of Preparer Other Than Taxpayer

Date

61



Tax Type 61

(Submit With Three Affiliated Tribes Motor Vehicle Fuel Tax Report S01)



Tax Type 61

(Submit With Three Affiliated Tribes Motor Vehicle Fuel Tax Report S01)